



Risk Factors

Waist hip ratio

Stage 2

Epidemiological Series Report # 2007-24

April 2007

Introduction

The following overview presents the prevalence and incidence of central adiposity among the participants of the North West Adelaide Health Study, and the demographics and chronic conditions associated with high waist hip ratio. Stage 1 (baseline examination) of the study was conducted between 2000 and 2003, and Stage 2 (second examination) was conducted from 2004 to 2006.

Measurement and definition of central adiposity

Central adiposity as measured by waist hip ratio (WHR) can be calculated from measurements undertaken at the clinic of waist and hip circumference using a standard measuring tape. A WHR of greater than 1.0 for men or 0.85 for women is indicative of android obesity¹. Where body mass index (BMI) is a summary of overall height and weight, or total adiposity, WHR provides a measure of fat distribution.

Incidence of central adiposity (WHR)

The incidence of developing a high waist hip ratio from Stage 1 to Stage 2 among those who had normal waist hip ratio was 34.2 incident cases per 1000 population.

Prevalence of central adiposity – Stage 1 & Stage 2

The prevalence of high waist hip ratio according to clinical assessment for both Stage 1 and Stage 2 is shown in Table 1. Overall, in Stage 1, 16.4% (95% CI 15.3-17.6) and in Stage 2, 23.3% (95% CI 21.8-24.8) of study participants had a high waist hip ratio.

Table 1: Prevalence of central adiposity (WHR)

| | Stage 1 | | Stage 2 | |
|---|---------|-------|---------|-------|
| | n | % | n | % |
| Normal (WHR <= 1.0 (men) and 0.85 (women)) | 3393 | 83.6 | 2434 | 76.7 |
| High WHR (WHR > 1.0 (men) and 0.85 (women)) | 665 | 16.4 | 738 | 23.3 |
| Total | 4058 | 100.0 | 3171 | 100.0 |

* Note: (Stage 1) 2 participants and (Stage 2) 35 participants did not provide measurements and were excluded

Transition to and from central adiposity (WHR)

Overall, 11.4% (95% CI 10.4-12.6) of participants went from having a normal WHR in Stage 1 to a high WHR in Stage 2.

Table 2: Transition to and from central adiposity according to WHR

| Stage 1 | Stage 2 | n | % |
|------------|------------|------|-------|
| Normal WHR | Normal WHR | 2311 | 72.9 |
| Normal WHR | High WHR | 362 | 11.4 |
| High WHR | High WHR | 376 | 11.8 |
| High WHR | Normal WHR | 122 | 3.9 |
| Total | | 3171 | 100.0 |

¹ O'Dea K, Walker K, Colagiuri S, Hepburn A, Holt P, Colagiuri R.. *Evidence Based Guidelines for Type 2 Diabetes Mellitus. Primary Prevention. Canberra: Diabetes Australia and NHMRC; 2002*

The prevalence of high waist hip ratio in Stage 1 was 16.4%, which increased to 23.3% for Stage 2.

Overall, 11.4% of participants had their WHR increase from a normal level to a high level in Stage 2.

Demographic profile of people with high central adiposity (WHR)

The prevalence of central adiposity as measured by high waist hip ratio was statistically significantly higher among females, those aged over 35 years, adults living alone, or with partner but not with children, or sole parents, those widowed or those part time, casual or retired or home duties. The prevalence of high waist hip ratio significantly lower among those with a bachelor degree or higher or a trade, apprenticeship, certificate or diploma, those earning more than \$20,001, or those who had never been married (Table 3).

Table 3: Univariate Odds Ratios for demographic variables associated with high WHR

| Variable | n | % | OR | (95% CI) | p value |
|--|----------|------|------|--------------|---------|
| Sex | | | | | |
| Male | 253/1564 | 16.2 | 1.00 | | |
| Female | 485/1607 | 30.1 | 2.24 | (1.88-2.65) | <0.001 |
| Age group | | | | | |
| 20 to 24 years | 16/221 | 7.3 | 1.00 | | |
| 25 to 34 years | 66/674 | 9.8 | 1.39 | (0.79-2.45) | 0.26 |
| 35 to 44 years | 105/646 | 16.3 | 2.49 | (1.44-4.30) | 0.001 |
| 45 to 54 years | 156/562 | 27.8 | 4.90 | (2.85-8.40) | <0.001 |
| 55 to 64 years | 149/432 | 34.5 | 6.72 | (3.90-11.58) | <0.001 |
| 65 to 74 years | 120/325 | 36.9 | 7.46 | (4.28-12.99) | <0.001 |
| 75 years and over | 124/311 | 40.0 | 8.50 | (4.88-14.82) | <0.001 |
| Highest education level obtained* | | | | | |
| Secondary | 448/1408 | 31.8 | 1.00 | | |
| Trade/apprenticeship/cert/diploma | 207/1158 | 17.9 | 0.47 | (0.39-0.56) | <0.001 |
| Bachelor degree or higher | 60/538 | 11.1 | 0.27 | (0.20-0.36) | <0.001 |
| Gross annual household income* | | | | | |
| Up to \$20,000 | 209/596 | 35.0 | 1.00 | | |
| \$20,001- \$40,000 | 200/717 | 27.9 | 0.72 | (0.57-0.91) | 0.006 |
| \$40,001- \$60,000 | 124/681 | 18.2 | 0.41 | (0.32-0.53) | <0.001 |
| More than \$60,000 | 153/1032 | 14.8 | 0.32 | (0.25-0.41) | <0.001 |
| Family structure* | | | | | |
| Family & children, 2 biological/adoptive parents | 203/1183 | 17.1 | 1.00 | | |
| Adult living with partner, no children | 232/839 | 27.7 | 1.85 | (1.50-2.29) | <0.001 |
| Adult living alone | 124/425 | 29.2 | 2.00 | (1.54-2.58) | <0.001 |
| Adults – related/unrelated, living together | 67/335 | 19.9 | 1.21 | (0.89-1.64) | 0.23 |
| Step/sole/shared parenting & other | 95/331 | 28.6 | 1.94 | (1.47-2.58) | <0.001 |
| Marital status* | | | | | |
| Married or living with partner | 489/2107 | 23.2 | 1.00 | | |
| Separated/divorced | 75/271 | 27.7 | 1.27 | (0.95-1.68) | 0.10 |
| Widowed | 88/209 | 42.1 | 2.40 | (1.79-3.22) | <0.001 |
| Never married | 77/557 | 13.9 | 0.53 | (0.41-0.69) | <0.001 |
| Work status* | | | | | |
| Full time employed | 232/1416 | 16.4 | 1.00 | | |
| Part time/casual employed | 111/527 | 21.1 | 1.37 | (1.06-1.76) | 0.02 |
| Unemployed | 18/75 | 23.7 | 1.59 | (0.91-2.75) | 0.10 |
| Home duties/retired | 343/975 | 35.2 | 2.77 | (2.29-3.36) | <0.001 |
| Student/other | 23/149 | 15.7 | 0.95 | (0.60-1.51) | 0.84 |

*Not stated category not reported

Those with high waist hip ratio were more likely to be:

- female;
- aged over 35 years;
- adults living without children or being a sole parent;
- widowed; or
- part time, casually employed, retired or home duties.

High waist hip ratio was statistically significantly more likely among those who had diabetes, asthma, COPD, cardiovascular disease, arthritis or a mental health condition.

Chronic Condition profile of central adiposity (WHR)

High waist hip ratio was statistically significantly more likely among those who had diabetes, asthma, COPD, cardiovascular disease, arthritis or a mental health condition than in those without these conditions (Table 4).

Table 4: Univariate Odds Ratios for Chronic Conditions associated with high WHR

| Variable | n | % | OR | (95% CI) | p value |
|---------------------------------|----------|------|------|-------------|---------|
| Diabetes* | | | | | |
| No | 618/2923 | 21.1 | 1.00 | | |
| Yes | 116/226 | 51.2 | 3.92 | (2.97-5.16) | <0.001 |
| Asthma* | | | | | |
| No | 588/2653 | 22.1 | 1.00 | | |
| Yes | 149/517 | 28.8 | 1.43 | (1.15-1.76) | 0.001 |
| COPD* | | | | | |
| No | 670/2968 | 22.6 | 1.00 | | |
| Yes | 51/149 | 34.0 | 1.77 | (1.25-2.51) | 0.001 |
| Cardiovascular Disease* | | | | | |
| No | 644/2926 | 22.0 | 1.00 | | |
| Yes | 79/203 | 38.9 | 2.26 | (1.68-3.04) | <0.001 |
| Arthritis* | | | | | |
| No | 465/2464 | 18.9 | 1.00 | | |
| Yes | 256/652 | 39.2 | 2.77 | (2.30-3.34) | <0.001 |
| Mental Health Condition* | | | | | |
| No | 570/2646 | 21.5 | 1.00 | | |
| Yes | 152/481 | 31.7 | 1.69 | (1.37-2.09) | <0.001 |

* Don't know/ refused/ not stated category not reported

People with a high waist hip ratio have significantly lower quality of life scores for all dimensions of the SF-36.

Quality of Life profile of central adiposity (WHR)

Figure 1 shows the mean scores of the SF-36 subscales for people with normal or high waist hip ratio. People who had a high waist hip ratio scored statistically significantly lower on all dimensions of the SF-36 when compared with those with normal waist hip ratio.

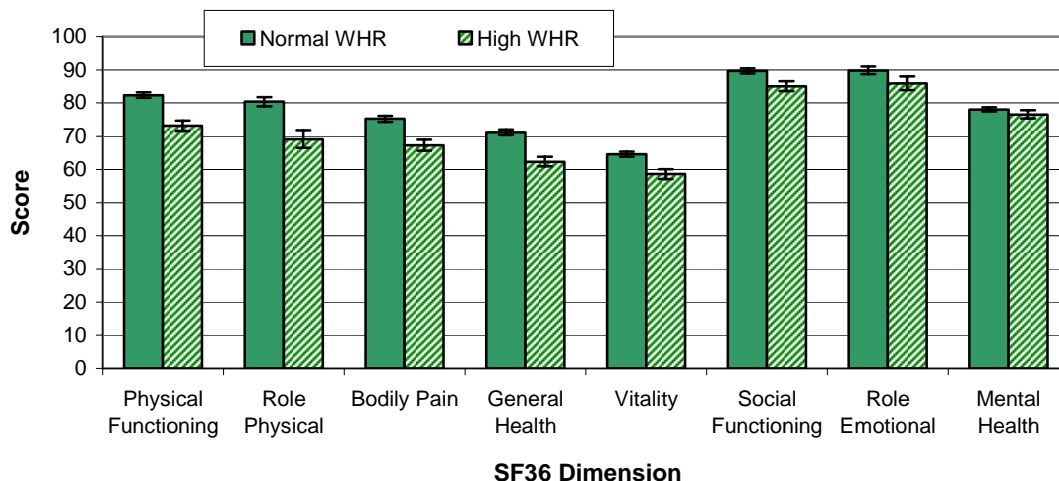


Figure 1: SF-36 mean scores for Normal and High WHR

This document is one of a series of reports concerning Stage 2 of the North West Adelaide Health Study. Please see website for other reports in the series - www.health.sa.gov.au/pros/

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